- 14-21 A	ddress (include city and zip code)	9	75 <i>~</i> 329	(, Ste 200 Telephone No. - +28+	89509
-Mail Ad			1716.64 Mar		
Select Ap	ppropriate Box(es) CANDIDATE PAC B	AG POLPR	TY IND EXP	AMENDED AN	NUAL FILING
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ncumber Il others	nts in an Office with a 6-year term Period: Dec. 2 Period: Jan. 1	5, 2001 — Aug 26, 20, 1998 — Aug 26 , 2004 – Aug. 26, 2 5, 2002 – Aug 26, 2	, 2004 2004	۵ ا	CT 2 6 2004
≰	Report #2 Due — October 26, 2004 Period: Aug. 2	27, 2004 — Oct. 21	, 2004		ETARY OF STATE
AGs on		2, 2004 — Dec. 31 2, 2004 - Dec. 5, 2			
Third I	Annual Filing – Due January 15, 2005 Period: January 1, 2004 – December 31, 20 Report suffices for 2005 Annual Filing if ca	004	led Report Nos.	1 and 2	
	CONTRIBUTIONS SUMMARY			This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting
1.	Total Monetary Contributions Received in Excess	of \$100		1050,00	8350.00
2.	Total Monetary Contributions Received of \$100 or	Less		135,00	205,00
		This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting Period		
	Total Amount of Monetary Contributions Received (Add Lines 1 and 2) Total Value of In Kind Contributions Received in Excess of \$100			1185,00	8555,00
	EXF	PENSES SUN	MARY		
	Total Monetary Expenses Paid in Excess of \$100			5000,00	6750.00
7.	Total Monetary Expenses Paid of \$100 or Less Total Amount of All Monetary Expenses Paid (Add Lines 5 and 6)			5000.00	6750,00
8.	Total Value of In Kind Expenses in Excess of \$100	<u> </u>	6		
	Under Penalty of Perjury That the Foregoing	AFFIRMATION			

	suchiatric	Association	Political	Action	Committee
Name (print)		Office (if applicable)		Dis	strict (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
John Chappel 3165 Socrates Dr- Neno NV 89512	9/9/04	300,00	399
William Stone	10/14/04	500,00	
Las Vegas NV 89102 Charles Price 1775 Fairfield Ave reno NV 89509	10/14/04	250,00	
	7.1		

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Nevada Psychiatric Association Political Action Committee

Name (print) Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	А
Expenses related to volunteers	В
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	Н
** Goods and services provided in kind for which money would otherwise have been paid	l
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	К

^{**} NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

Nevada Name (print) Hssociation Office (if applicable)

Political Action Committee

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
Randolph Townsend 6026# Plumas st Reno NV 89509	T	8/27/04	750,00
Joe Hardy 895 Adams Bird Bonlder City NV 89005 Richard Perkins	ナ	9/13/04	500,00
Richard Perkins 408 Glasgow St Hindurson NV 89015	ケ	10/1/04	750.00
William Horne 2251 N Rampart Blud Las Veggs NV 89128	T	10/1)04	500,00
Barbara Buckley 5442 Holbrook Br Las Vegas NV 89103	T	10/1/04	750,00
Garn Maber 1404 Silver bales St Las Vegas NV 89117	ナ	(0)1)04	500,00
Toe Hell 1769 Harpsichord Way Henderson NV 89012	5	10/1104	500,00 250,00
Ellen Koivisto 1147 Timber Ridge Ct Las Vegas NV 89110	丁	10/11/04	500,00
,			

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IN KIND CONTRIBUTIONS AND EXPENSES REPORT

IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.

In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.

The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)

Examples of in kind contributions: (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

Example of in kind expenses: (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

PAGE 5 OF 7

Nevada	Psnchiatric	Association
Name (print)	7	Office (if applicable)

Bolitical Action Committee

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION	CHECK HERE IF LOAN
None				

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PAGE 6 OF

Nevada	Pshelicotic	Association	Political	Action	Committee
Name (print)	1	Office (if applicable)		Distr	ict (if applicable)

IN KIND

Expenses in Excess of \$100 Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF			
PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE
None			

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Prescribed by Secretary of State NRS 294A.120, 294A.125, 294A.140, 294A.150, 294A.160 294A.200, 294A.210, 294A.220, 294A.362 EL201.doc

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